PART B-ISSUE FEE TRANSMITTAL

Complete and mail this form, together with app

T.C.

36NI

Box !SSUE FEE
Assistant Commissioner for Patents >
Washington, D.C. 20231

242-60at

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1).

Printing Olivipion

DONALD L WOOD YOUNG AND BASILE SUITE 624 3001 W BIG BEAVER TROY MI 48084-3109 JUL 1 6 1998

le fees, to:

Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Janet H. Fournier (Depositor's name)

(7-13-98 (Depositor's name)

-					1/-1/13-9	8	(Date)
APPI	LICATION NO.	FILING DATE	TOTAL CLA	IMS	EXAMINER AND GROUP ART UNIT		DATE MAILED
	08/786,667	01/21/97	025	CONLEY,	F	3633	04/13/98
First Named Applicant	CLANCY,		JOH	N M.			

INTERIOR MULTI-POINT SLIDING DOOR LATCH

17722 200V77 V2		1 2 2 2 1					
ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SI	MALL ENTITY	FEE DUE	DATE DUE
SSH-016	292-026.	000 C8:	2 UTIL	ITY	YES	\$660.00	07/13/98
1. Chappy of correspondence address of PTO form(s) and Customer No. Change of correspondence address PTO/SB/122) attached. "Fee Address" indication (or "Fee Address")	(1) the name attorneys or the name of member a reand the name	initing on the patent front page, list ames of up to 3 registered patent s or agents OR, alternatively, (2) e of a single firm (having as a a registered attorney or agent) names of up to 2 registered patent s or agents. If no name is listed, no libe printed.					
(B) RESIDENCE: (CITY & STATE Of Please check the appropriate assign ☐ individual ☐ Xcorporation or	is identified below, no assignment of the controls, in a country of the country o	nee data will appear It has been previou Inc. Inc. Iale, MI (will not be printed	ar on the patent. sly submitted to T a substitue for on the patent)	of Pat iss Ad Ab. The fo DEPO (ENC	ents and Tradema ue Fee vance Order - # of ollowing fees or de OSIT ACCOUNT N LOSE AN EXTRA ue Fee vance Order - # o	f Copies eficiency in these fer	es should be charged to:
The COMMISSIONER OF PATENTS A	ND TRADEMARKS IS reque	sted to apply the Is	sue Fee to the app	plication id	entified above.		
(Authorized Signature)		(Date)				
Donald L. Wood		7,	/13/98				
NOTE; The Issue Fee will not be accept or agent; or the assignee or other party Trademark Office.	07/20/1998 ASEAFORT 00000195 08786667 01 FC:242 660.00 0P						
Burden Hour Statement: This form depending on the needs of the individual to complete this form should be sen Office, Washington, D.C. 20231. DC ADDRESS. SEND FEES AND THIS Patents, Washington D.C. 20231. Under the Paperwork Reduction Act of information unless it displays a variance.				550°.00 UF			